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Ethical aspects in the psychotherapy of graduates, with an accent on spirituality and religion

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Abstract

Ethical aspects in psychotherapy for undergraduates, with an accent on spirituality, religion
Problem Statement: The contribution deals with the question of value of religion as a tool for therapeutic practice
Research Questions: To what extent can the value of religion affect the process of therapy?
Purpose of the Study: The contribution deals with contemporary ethical dilemmas in psychotherapy through the focus of Existential analysis and Logotherapy. Spirituality and religion are values that affect both client's and therapist's perception of their mutual relationship.
Research Methods: The contribution contains casuistic of individual clients, with the accent on qualitative evaluation. The results clarify the process of how spirituality and conscious religious values affect both the therapist - client relationship and the client's progress.
Findings: In their practice therapists are obliged to hold to certain ethical principles. However, in day-to-day practice these principles may not be sufficient, and in their decisions therapists must listen to their conscience and ethics. The issue of spirituality and religion has an undisputed impact on forming a person's conscience, no matter whether in position of a client or a therapist.
Conclusions: Logotherapy deals with spiritual issues, especially the issue of meaning. The conflict with theology is thus inevitable. The aim of psychotherapy is the mental recovery, the aim of religion is the salvation of soul. Religion can positively affect client's health, providing it is distinguished and used correctly.

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1. Introduction

Autonomy and respect to the client play a crucial part in therapeutic work. Examples of disrespecting this postulate are situations when a consultant tries to change a client's convictions and worldview, and instead, to impose his or hers. Just as love, that is perceived as a positive feeling, can turn into a noxious, harmful passion, other values, that are perceived neutral, can gain contra-productive connotation. Among other values we can name the attitude to money or faith. Money can cause greed, faith can be misused for manipulation. A consultant must be aware of this danger, that is why it is essential for a consultant to examine their stance to these values even during the process of their qualification. Values are intrinsically anchored in the centre of our self, both in private and professional life. Consultant's accepted values make both conscious and unconscious effect on the work with a client, they affect the perception of the session, of the set goals as well as how a consultant evaluates both the outcomes of the session and the client's present state. A consultant should try to avoid imposing his priorities on a client, even though the temptation to do so may be enormous, especially in certain stages of the therapy.

2. Problem statement

The paper deals with the concept of religion as a tool in therapeutic practice

3. Research Questions

To what extent may religion affect the therapy?

4. Purpose of Study

Even though a consultant does not agree with client's priorities, it is inevitable to respect them as a whole, especially when a client comes from a different cultural background. Gerald Corey differentiates between values presented by the consultant to the client, and those that the consultant imposes on the client, stating these are the only truthful values (Corey, 2013, p. 23). Values that are not just presented to the client but even imposed can affect his or her behavior, stance and even their faith.

Let us look into some specific dilemmas that may appear as difficult. Let us look at an example that many believers consultants have experienced in their practice. A strong believer therapist dealing with a client that is also a believer, struggling with a long-term dys-functional marriage and considering a divorce. The consultant believes in inseparability of marriage, however, there is a client who is unable to keep the marriage, in fact, it is the other way round, keeping the marriage up would damage the development of children born in this wedlock. Unless the therapist can give up his perception of the world and the family, he may impose these values on the client regardless of the ethic of the therapist – client relationship. Despite the enormous effort of empathy, some principles of strongly religious people can simply be unbearable. It is inevitable to evaluate what options are realistic in each specific situation. In some situations the faith is the last thing a client can lean on. What are the realistic options of how to solve this difficult situation for a person, who, on one hand, does not recognize a divorce due to his or her faith, on the other hand, the marriage in which he or she lives is, due to alcohol and domestic violence, highly destructive. No therapist can deprive a person of their faith, which would turn out to be non-ethical and unprofessional behavior. No therapist can judge the faith of the person despite viewing it restrictive and life-preventing. In fact, can what a therapist do in a situation like this? He has no other choice but to lead the person to his or her innermost core, to make the client examine their heart and mind so that they would be able to answer the uttermost question – what faith means for them in the day-to-day life, in what way it frees them, what it provides for them, and on the other hand in what way it binds them to the extent that it makes life impossible. In this sense, the therapist is to track the values independent on belief. The values that indicate whether they are assumed, and thus lived out. It is a tough task, requiring a lot of patience and wisdom.

In this concept the therapist should be able to dismiss their views and fully identify with the person before him. He is the one who is responsible for the client's good by looking through his eyes, by helping the client to carry his

burden in an ethical way that is not, at the same time, in conflict with therapist's conscience. Nevertheless, we must admit that these are really difficult situations, when each correctly chosen word is worth gold, and when time and humility are, along with maturity and kindness, the best therapist's tools at most cases.

Similar examples are linked with the problems of pre-marital sexuality and of masturbation. Unless the therapist is mature, surpressing his prejudices and can appreciate the client's faith, he can cause the client more incongruences than the client was dealing with at the time he sought out the therapist. Even in these controversial questions the therapist is bound to keep in mind the client's good, with long-term effect if possible. This is a delicate matter in which the therapist is involved while trying to lead his client to a meaningful life, thus it is inevitable that the therapist himself follows the ethic principles, especially in connection with overloading, with being supervised by a mature and experienced colleague and with the cultivation of his own conscience.

The cultivation of conscience was dealt in the previous chapter. We assume this is one of the pivotal tasks of the therapist, especially when the faith is involved. Pursuing client's good and being kind, yet wise, places such high demands on the therapist that it is impossible to gain all the skills just by education or learning. Such skills must be sparked even before he started his formation as a therapist. However, personal cultivation is a never-ending process of a therapist.

As a matter of fact, how shall we define religion on the theoretical level? And what is the link between religion and psychotherapy? There are many features in common for both the important phenomena that can be found in various humanities and psychological disciplines, including logotherapy. Religion is perceived as "any system of thoughts and acts that is common to a group of people, which provides them with a framework for orientation and with an object of worshipping" (FROMM, 2003, p. 31) It facilitates the relation with transcendence; it has a system of symbols, rituals. It is a diverse phenomenon.

The matter of religion is also described by religionistic, which is a science about religion. The name religion is derived from a Latin word *religio*, which describes the notion of religion in many languages. According to one explanation the word *religio*, is derived from *ligare*, which means "to twine", thus *re-ligare* may mean "intertwine". *Re-ligio* can thus be explained as a mutual tie between a man and a Reality that reaches behind him. (ŘÍČAN, 2007, pp. 33-34).

Psychotherapy, especially logotherapy, deals with spiritual issues, particularly the question of meaning and, ultimately, the question of God. Therefore it cannot avoid confrontation with theology. Unlike theology the aim of psychology is to become aware of things, reality, to heal, not to bring salvation. "The aim of psychology is mental healing, the aim of religion is the salvation of the soul" (FRANKL, 2006, p. 46). In this concern the priorities differ substantially, as the priest struggles for the salvation of a believer regardless the believer falls down into even deeper emotional tension, which he cannot be spared of, as a Jesuit priest from USA mockingly remarked: "Religion is more than a mere means of delivering people from psychosomatic stomach ulcers." Religion can unintentionally but consequently, have psychohygienic and psychotherapeutic impacts. Religion enables people to live out safety and grounding that they would not find anywhere else, safety and grounding in transcendence. Similarly, unintentional side effect can be observed in the field of psychotherapy, when the client re-discovers the long-lost original source of the primeval, unconscious, suppressed disposition to faith (FRANKL, 2006, p. 46).

Intensive co-operation of theologians, ministers, psychologists and psychiatrists is an ideal state. Patients often see a doctor with their struggle for meaning in life, often with a feeling of spiritual distress, which may manifest itself in pathological somatic symptoms such as high blood pressure, eczema or chronic fatigue.

Logotherapy falls into the psychiatry and medical category – thus it is entitled to deal not only with the will for meaning but also with the will for the upper meaning. Faith is a trust in upper meaning. Our perception of religion has just little in common with religious short-sightedness that represents a God as a being that serves the only purpose: to make as many believers as possible, believing in him just in the prescribed religious way. Each branch of psychology thus perceives faith as a belief in meaning. Paul Tillich offers this definition: "Being religious means to ask passionately questions about the meaning of our existence." (FRANKL, 2006, p. 52).

There is a research, dealing with a positive relationship between religion, spirituality and health of an individual. There are examples of spiritual and religious factors that positively affect mental health. Religion has positive impacts on health in these spheres:

- a) Mobilization of internal sources of a personality – it increases self-esteem, contentment with life, happiness; improves sense of meaningfulness, motivation; increases hope;
- b) Enhancement of social support to a person through external sources – both in practical and emotional levels;
- c) Help in specific problems of an individual – e.g. higher adaptation to sorrow, increased effectiveness in treatment of addictions (alcoholism), reduces anxiety, loneliness, number of suicides (COOK; POWELL; SIMS, 2009, p. 19).

Everything in our lives can be either used for good or misused, this truth holds for religion and psychology itself, as well. Each of us can visualize negative consequences of a very good cause. Above we critically dealt with forms of causes that were poorly applied, though well-intended. Nevertheless, our aim is to search for the good linking points that serve to individuals in all their dimensions – i.e. physical, mental, social and spiritual ones.

True religiosity can be found wherever there is a religion deployed in the fields of mental health or social health with the function of:

- a) liberation, not enslavement;
- b) healing, not damage;
- c) true stabilization, not destabilization
- d) where it represents a base for true self-fulfillment and strong-minded task management both in personal and social spheres. (ROBINSON, 2007, p. 15)

5. The power of prayer

Some psychotherapeutic theories deal with the importance of prayer in the therapy. The relation between rituals, religion and psychotherapy is described in the works of Valerie Demarinis (DEMARINIS, 1996, pp. 235-266). A prayer covers processes of communication, participation, listening and transcendence. A prayer enables communication with the existence, makes a person to become aware of his existence and of the personal meaning of life. It may contribute to rhythmic shifts between dependence and autonomy, it leads to mature dependence on trustworthy environment without losing the sense of the own autonomy. A prayer can support the hope of a fearful person and it can transform vision of a self-accusing person to the brighter one. J. P. Webster distinguishes between different kinds of prayer – concentrating, imaginative and verbal (GUBI, 2007, p. 64).

Concentrating prayer is a prayer of an individual with accent on breathing rhythm, simply structured phrases or on combination of both ones. This kind of meditation mediates the awareness of the present transcendence, leads a person to concentration on his “false self” and to becoming aware of his “spontaneous self”. It can help both the therapist and the client break through their defensive behavior and get to their true experience. Webster contends that therapists can use this concentrating prayer for themselves before the session with the client so that they would meet with the client without an agenda which can turn out to be an obstacle in understanding the client's current experiencing. There can be profit from the concentrating prayer for the client as well. It is possible to utilize the prayer at the beginning or at the end of the session, depending on whether you want to deploy it either for concentration or integration of the therapy. **Imaginative prayer** is a method how to create mental images in order to re-live and stay in the situations of the past, present and future. It is also a way to re-live a dream. All the prayer attitude enables the client to search for search within. **Verbal prayer** enables the client to articulate what he or she found within. An articulated prayer opens mind and heart, thus clients can overreach the existing limits of perspective and will. Webster sets an example of prayer at the beginning of the session:

“Lord, I am standing here and my spirit is still restless. I want to concentrate all my attention on you, unload all my worries at you, when I turn to you. Here's my heart, O, God, in this special time with my therapist. I am begging

you for your touch and your kindness; I give you thanks for this time and for your presence in everything, for your lead and push and encouragement, for your food and nurture. I am looking forward to what you are going to accomplish in my life, in the lives of those who are connected with mine.(GUBI, 2007, p. 64).

Verbal prayer reveals and discloses the relationship between a person and God, between oneself and others. It leads to the limits of human ideas about God, which requires growth and broadening of heart and mind. Words enable the therapist and the client to concentrate rather on experiences, they are tools to express client's true self, and they are a link between the client and the therapist, who offers the acceptance and appreciation of client's true self. Webster contends that verbal prayer serves to purposes that are in harmony with psychotherapy. He suggests that a therapist would use the prayer providing the situation turns into five following scenarios:

- a) if the client expresses the desire to turn to God;
- b) if the client wants to develop his autonomy;
- c) if the client is ready to admit he needs help;
- d) if the client accepts the challenge to exceed their limits that they previously built within themselves;
- e) if the therapist is able to mirror the client's relationship with God. (GUBI, p. 65)

Providing the client requires a prayer, the therapist should discuss the client's precise expectation and it means for their mutual therapeutic relationship. Webster illustrates:

Client: *Can we pray during the therapy?*

Therapist: *If you want to, we can. What are your incentives? [...] What do you expect from the prayer? [...] When we begin to pray, I want you to express freely in words or in silent prayer, to feel free to manifest yourself in a way that is natural for you [...] What is your opinion? [...] Do you have any idea or any notion when you would like to pray?*

Everything should be conveyed with respect, the therapist should make the client's request clear, he should discuss with him or her the concept of freedom, client's self-control and autonomy – phenomena inevitable for an authentic prayer. By no means should there be a dictate imposing the form and content of the prayer to the client. The therapist should not impose the prayer itself to the client, unless he asks for it. The therapist should respect the client's requests; there are times when clients just need to calm down. What is important is that the therapist and client would be authentic and would not do anything they consider wrong and thus could not live out. There can arise a real situation when the client asks for a prayer, however, he does not want to pray himself. If it is clear what value the prayer represents for the client in the process, it can create the viable space for the client to feel psychologically accepted, which naturally facilitates the experience of oneself. Webster also recommends that the prayer should not exceed five minutes. (GUBI, 2007, pp. 65-66) A prayer is supposed to reveal client's feelings and thoughts that he might deny otherwise.

As logotherapy and existential analysis are specializations largely concentrating on man's spirituality, an existential analyst is liable to come across quite a lot of clients – believers. A prayer should be something natural, it should deepen the relationship with God, others and themselves, and it should discover options of the client's further orientation. In this regard a therapist should remain authentic and not force himself into situations where he does not feel comfortable. Suppose he feels not to be the right person for the client, he should handle the situation in a healthy and mature way. Prayer is just a means of how to deepen and improve the process of the entire therapy.

6. Research Methods

The contribution covers clinical cases of individual clients that are qualitatively evaluated, which prove how spirituality and consciousness value of religion affect the relationship between the therapist and the client as well as the improvement.

1st clinical case

A 22 year old male medical student comes to the counselling center after he broke up with his girlfriend. He feels betrayed, angry with his ex-girlfriend who left him. The man comes from a strong Christian background. As he puts it, he lives in a small town where the neighbors know everything about each other, and where the traditional concept of Christianity plays an important role. He himself grew up under the pulpit, accepting the traditional concept of faith. The break point arose in the second grade of medical studies when he started dating a girl out, not having sexual intercourse though. At that time he started to masturbate (for the first time in his life!) and he felt guilty. In the counselling centre he searched for comfort, advice and help as to how to distinguish what is acceptable by the Church and what is sin. Religion plays an important role in the live of this client.

2nd clinical case

The reason why a female student of Faculty of Pedagogics (20) comes for a counsel is a feeling of meaninglessness she deals with on the daily basis. She does not see a meaning in getting up in the morning and going to school. She doubts that she is majoring the right subjects, she feels lonely. She confides that she is one out of six children, from a strong Christian background. Despite anxious-depressive feelings she would like to stay in the faculty and finish her studies. In her day-to-day life she feels insufficient, sad, she perceives an unidentifiable anxiety. After a few sessions when we discuss and analyze her situation, the religion turns out to be a strong support in her life that she can lean on. She perceives her faith as a pivotal point that helps her in her search for meaning in things in which the meaning seems to dissipate. After one year of sessions the client feels that it is a good thing she did not quit her study, she feels she has more energy and courage to take up new challenges. She attributes the improvement alongside other things to her faith in which she sees meaning despite all difficult events in her life.

3rd clinical case

A thirty-year old female student of Faculty of Pedagogics came to the counselling office because of a bad relationship with her mother as well as with other people. She sees her father hardly ever; she says he is homeless. Seeing her brother is sporadic, too. She does not have many relationships at the university, either. She and her mother attend Church regularly. Her mother's behavior towards her is hostile, she negatively comments on men in the life of her daughter. In short, she does not support any relationship of her daughter; she wishes her daughter would never marry. Due to the commandment "Honor your father and your mother..." the client feels obliged to her mother, and is unable to stand her up. She feels she must do everything her mother thinks is right. However, by the same token, in her heart she rejects this concept of faith. She has an aversion to what her mother says. In the sessions we are trying to find the role of her faith in her life, with accent on healthier form of faith.

4th clinical case

A client came to the counselling center; a male of 45, married with 4 children, from quite a strong Christian background. He suspects his wife of having an affair despite the children. They have hardly had any conjugal life. The communication between them is really scarce, he has been on antidepressants for 2 years. He has a strong bond to the children; as he says this is the only reason why he puts up with a relationship like this, otherwise he would like to get divorced. He minds his wife getting dressed attractively; he is jealous of her, she is taller than he. He claims she nearly does not care about him. They had a church wedding 20 years ago, both of them coming from fairly strong Christian backgrounds. On Sundays they attend Church separately. They would like to get divorced, but, as the man claims, religion prevents them from doing so. They had a big church wedding, most of their relationships are within this society. Religion plays an important role in their marriage and is the reason why this couple sticks together despite not living as husband and wife any more.

7. Findings

A therapist keeps up some ethical principles in his job. However, in reality such "norms" are not often enough, so the therapist must act under his own conscience and ethics. The issue of spirituality and religion plays a considerable role in forming a man's conscience, both of a client and a therapist, so the therapist should learn to distinguish when to use this tool and when not. While working with believing clients the therapist should distinguish sensitively cases when faith can serve to a personal growth and when it can block the growth by its distorted concept.

8. Conclusion

Logotherapy deals with the issues of spirituality, especially with the issue of meaning. Confrontation with theology is thus unavoidable. The aim of psychotherapy is healing of mind, the aim of religion is salvation of the soul. Religion can positively affect client's health on the condition that this tool is properly recognized and used. To recognize it properly requires unceasing self-improvement; the therapist must not only constantly hone and scrutinize his own values, but he must also support and develop experiencing of his clients as well as of his own. Honing their own conscience is of vital importance.

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